SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3383 / 4630 (check only one) X 17a 16 17b 17c 17d 18 19a 19b

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) DR. JOHN PAUL VANDERPOL Mailing Address 3 COMPASS CIRCLR		Transaction ID : SA17.990093 Date of Receipt 01 01 2016
FEC ID number of contributing federal political committee.	C	CONTRIBUTION
		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	100.00
Receipt For: 2016	Election Cycle-to-Date ▼	
Primary General Other (specify) ▼	2040.00	
Full Name (Last, First, Middle Initial) MS. MICHELE VANDERSALL		Transaction ID : SA17.946476 Date of Receipt
Mailing Address 5230 GREEN FARMS RD		01 20 / Y Y Y Y Y Y
City EFINA	State Zip Code MN 55436-1068	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF	Occupation BUSINESS OWNER	25.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 441.00	
Full Name (Last, First, Middle Initial) MS. MICHELE VANDERSALL		Transaction ID : SA17.984518 Date of Receipt
Mailing Address 5230 GREEN FARMS RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EFINA	State Zip Code MN 55436-1068	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF	Occupation BUSINESS OWNER	25.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date	
Subtotal Of Receipts This Page (option	onal)	
Total This Davied /last years this line was	number only)	